

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | TH       | 953    | 4/21     |
| RESPONSE FORMALITY REVIEW | SG       | 1087   | 05-05-01 |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     |       | 6/8/98   |      |
| 2     |       | 2/27/99  |      |
| 3     |       | 2/27/99  |      |
| 4     |       | 2/27/99  |      |
| 5     |       | 2/27/99  |      |
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| 8     |       | 2/27/99  |      |
| 9     |       | 2/27/99  |      |
| 10    |       | 2/27/99  |      |
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If more than 150 claims or 10 actions  
staple additional sheet here

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5/7/01